





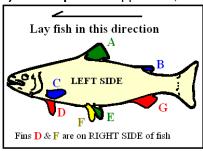


Angler Coastal Stream Survey Form

Please complete a separate form each time you visit the stream

SUBWATERSHED N	STREA	STREAM NAME:				
TOWNSHIP: COUNTY			Y:			
ANGLER INFORMAT	TON: Name:					
Email:	Ph	Phone:				
Mailing Addr	ess:					
DATE SAMPLED:	ES:	Datum:				
TOTAL # VOLUNTEER HOURS:						
SIGNATURE:						
FISH INFORMATION: a) Time started fishing: Time stopped fishing: b) Fish caught: (*Please list every fish you catch. If you need more room, record additional fish on back of sheet.)						
	Individual fish caught	Length (<6" or >6")	Fin clips?	Photo? (yes/no)		
example:	Brook trout	<6"	E	yes		

c) Fin clips - As applicable, use this diagram to record location of observed fin clips in column above.



Questions? Contact:







WATER TEMPERATURE:	GPS LOCATION:		
SIGNS OF ANGLER USE (check all that apply): • Fishing gear: • Trail to water: • Other: (explain)			
BARRIERS TO FISH PASSAGE (<u>check all that apply</u>): • Man-made structures: • Natural obstructions: • Culverts: Culverts above stream level?			

ANGLER COMMENTS

- Habitat observations
- Other comments

PHOTOGRAPHS - Please attach or send electronically

- All brook trout caught
- Barriers to fish passage
- Habitat characteristics